

## QUARTERLY STATEMENT

AS OF March 31, 2010 OF THE CONDITION AND AFFAIRS OF THE

## **HEALTH RIGHT, INC.**

NAIC Group Code	0000 (Current Period)	,		NAIC Company Code _	95787	Employer's ID Number	52-2011721
Organized under the Laws of	,	District of Colum	,	State of Dom	icile or Port of Entry	District	of Columbia
Country of Domicile		United States of An	nerica				
Licensed as business type:	Life, Accident of Dental Service Other[ ]			sualty[] se Corporation[] erally Qualified? Yes[]N	Health M	, Medical & Dental Service or In Maintenance Organization[X]	demnity[ ]
Incorporated/Organized		11/01/199	96	Comm	enced Business	05/01/19	98
Statutory Home Office		1101 14th Street,		,		Washington, DC 20005	
Main Administrative Office		(Street and	Number)		4th Street	(City, or Town, State and Zip Cod	le)
		Washington, DC 2000	15	(Street a	nd Number)	(202)218-0373	
		Town, State and Zip Cod				(Area Code) (Telephone Nu	mber)
Mail Address		1101 14th Street,		,		Washington, DC 20005	
Primary Location of Books ar	nd Records	(Street and Numb	per or P.O. Box)	1101 14th	Street, N.W. Suite	(City, or Town, State and Zip Coo	ie)
,				(5	Street and Number)		
		shington, DC 20005 r Town, State and Zip Coo	10)			(202)218-0373 (Area Code) (Telephone Nu	mbor\
Internet Web Site Address	(City, 0		thright-dc.com			(Alea Code) (Telephone Nul	niber)
Statutory Statement Contact		Mark Fra	ancis Yanson			(202)218-0373-160	
ciatatory ciatomoni contact		(	Name)			(Area Code)(Telephone Number)(	
	mark.ya	nson@healthright-dc. (E-Mail Address)	com			(202)218-0371 (Fax Number)	
		Do Da	<b>DIRECTO</b>	Chief Exceutive	Officer # Officer #		
County of  The officers of this reporting e he herein described assets w with related exhibits, schedule said reporting entity as of the Statement Instructions and Ac reporting not related to account	rere the absolute es and explanation reporting period eccounting Practice inting practices are the related cor	property of the said re ins therein contained, stated above, and of it es and Procedures mand procedures, accord responding electronic	porting entity, free annexed or referred s income and dedu anual except to the ing to the best of th filing with the NAIC	and clear from any liens of to, is a full and true state ctions therefrom for the pextent that: (1) state law reir information, knowledg, when required, that is an	or claims thereon, exement of all the asse eriod ended, and ha may differ; or, (2) tha e and belief, respect n exact copy (excep	entity, and that on the reporting pacept as herein stated, and that ets and liabilities and of the concave been completed in accordar at state rules or regulations requively. Furthermore, the scope the for formatting differences due	this statement, together dition and affairs of the nee with the NAIC Annual uire differences in of this attestation by the
Vincent A	Signature) Augustine Keane inted Name) 1. Chairman (Title)	- - -		(Signature)  Irk Francis Yanson (Printed Name) 2.  ef Financial Officer (Title)		(Signature) 0 (Printed Name) 3. 0 (Title)	
Subscribed and sworn  12th day of	to before me this	s , 2010	b. If no,	original filing?  1. State the amendment  2. Date filed  3. Number of pages attac		Yes[X] No[]	_ _ _

(Notary Public Signature)

## **ASSETS**

	AUU		urrant Ctatament Dat	•	4
		1	urrent Statement Dat		4
		1	2	3	D
			Nonadmitted	Net Admitted Assets	December 31, Prior Year Net
		Assets	Assets	(Cols. 1 - 2)	Admitted Assets
1.	Bonds				
2.	Stocks:				
	2.1 Preferred stocks				
	2.2 Common stocks				
3.	Mortgage loans on real estate:				
	3.1 First liens				
	3.2 Other than first liens				
4.	Real estate:				
4.	4.1 Properties occupied by the company (less \$0				
	encumbrances)				
	4.2 Properties held for the production of income (less \$0 encumbrances)				
	4.3 Properties held for sale (less \$0 encumbrances)				
_	. , ,				
5.	Cash (\$353,209), cash equivalents (\$25,661,000) and			04.40=.000	
_	short-term investments (\$5,111,719)				
6.	Contract loans (including \$0 premium notes)				
7.	Derivatives				
8.	Other invested assets				
9.	Receivables for securities				
10.	Aggregate write-ins for invested assets				
11.	Subtotals, cash and invested assets (Lines 1 to 10)	31,125,928		31,125,928	28,195,652
12.	Title plants less \$ 0 charged off (for Title insurers only)				
13.	Investment income due and accrued				
14.	Premiums and considerations:				
	14.1 Uncollected premiums and agents' balances in the course of				
	collection				
	14.2 Deferred premiums, agents' balances and installments booked				
	but deferred and not yet due (including \$0 earned but				
	unbilled premiums)				
	14.3 Accrued retrospective premiums				
15.	Reinsurance:				
10.	15.1 Amounts recoverable from reinsurers				
	15.2 Funds held by or deposited with reinsured companies				
	15.3 Other amounts receivable under reinsurance contracts				
16.	Amounts receivable relating to uninsured plans				
17.1	Current federal and foreign income tax recoverable and interest thereon $\dots$				
17.2	Net deferred tax asset	129,072	129,072		
18.	Guaranty funds receivable or on deposit				
19.	Electronic data processing equipment and software	1,078,535	881,535	197,000	225,000
20.	Furniture and equipment, including health care delivery assets				
	(\$0)	145,787	145,787		0
21.	Net adjustments in assets and liabilities due to foreign exchange rates				
22.	Receivables from parent, subsidiaries and affiliates				
23.	Health care (\$0) and other amounts receivable				
24.	Aggregate write-ins for other than invested assets				
2 <del>4</del> . 25.	Total assets excluding Separate Accounts, Segregated Accounts and	023,234	107,400		
25.	Protected Cell Accounts (Lines 11 to 24)	25 067 442	1 242 000	24 552 504	22 064 046
00		35,007,413	1,313,629	34,553,584	
26.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
27.	Total (Lines 25 and 26)				
	ILS OF WRITE-INS	50,507,715	1,010,029		1 00,307,210
	0				
	0				
1003.	0				
	Summary of remaining write-ins for Line 10 from overflow page				
	TOTALS (Lines 1001 through 1003 plus 1098) (Line 10 above)				
	DC Income Tax Receivable				
	Other Prepaid Expenses				
	Deposits Summary of remaining write-ins for Line 24 from overflow page				
	TOTALS (Lines 2401 through 2403 plus 2498) (Line 24 above)				
<u>_</u>	10 17 120 (Lines 2 10 1 timough 2700 plus 2700) (Lines 24 above)				1

STATEMENT AS OF March 31, 2010 OF THE HEALTH RIGHT, INC.

LIABILITIES, CAPITAL AND SURPLUS

	LIADILITIEO, OAI ITAL AND	Current Period			Prior Year	
		1 Covered	2 Uncovered	3 Total	4 Total	
1.	Claims unpaid (less \$0 reinsurance ceded)	26,146,709		26,146,709	24,975,548	
2.	Accrued medical incentive pool and bonus amounts					
3.	Unpaid claims adjustment expenses	612,000		612,000	612,000	
4.	Aggregate health policy reserves					
5.	Aggregate life policy reserves					
6.	Property/casualty unearned premium reserve					
7.	Aggregate health claim reserves					
8.	Premiums received in advance					
9.	General expenses due or accrued	1,247,016		1,247,016	1,143,605	
10.1	Current federal and foreign income tax payable and interest thereon (including \$0					
	on realized gains (losses))					
10.2	Net deferred tax liability					
11.	Ceded reinsurance premiums payable					
12.	Amounts withheld or retained for the account of others					
13.	Remittances and items not allocated					
14.	Borrowed money (including \$0 current) and interest thereon \$0					
' ' '	(including \$0 current)					
15.	Amounts due to parent, subsidiaries and affiliates					
16.	Derivatives					
17.	Payable for securities					
18.	Funds held under reinsurance treaties with (\$0 authorized reinsurers and					
10.	\$0 unauthorized reinsurers)					
10	· · · · · · · · · · · · · · · · · · ·					
19.	Reinsurance in unauthorized companies					
20.	Net adjustments in assets and liabilities due to foreign exchange rates					
21.	Liability for amounts held under uninsured plans					
22.	Aggregate write-ins for other liabilities (including \$0 current)					
23.	Total liabilities (Lines 1 to 22)					
24.	Aggregate write-ins for special surplus funds					
25.	Common capital stock					
26.	Preferred capital stock					
27.	Gross paid in and contributed surplus					
28.	Surplus notes					
29.	Aggregate write-ins for other than special surplus funds					
30.	Unassigned funds (surplus)	X X X	X X X	6,096,455	6,733,022	
31.	Less treasury stock, at cost:					
	31.10 shares common (value included in Line 25 \$0)					
	31.20 shares preferred (value included in Line 26 \$	X X X	X X X			
32.	Total capital and surplus (Lines 24 to 30 minus Line 31)	X X X	X X X	6,447,455	7,084,022	
	Total Liabilities, capital and surplus (Lines 23 and 32)					
2201. 2202.						
2203.						
2298. 2299.	Summary of remaining write-ins for Line 22 from overflow page					
2401.		X X X	X X X			
2402. 2403.		I I				
2498.	Summary of remaining write-ins for Line 24 from overflow page	X X X	X X X	l I		
2499.	TOTALS (Lines 2401 through 2403 plus 2498) (Line 24 above)					
2901. 2902.						
2903.		X X X	X X X			
2998. 2999.	Summary of remaining write-ins for Line 29 from overflow page					

# STATEMENT AS OF March 31, 2010 OF THE HEALTH RIGHT, INC. STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF REVENUE	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months	xxx	130,430	116,738	452,668
2.	Net premium income (including \$0 non-health premium income)	xxx	27,169,849	24,912,298	106,684,352
3.	Change in unearned premium reserves and reserves for rate credits	xxx			
4.	Fee-for-service (net of \$ 0 medical expenses)	xxx			
5.	Risk revenue				
6.	Aggregate write-ins for other health care related revenues	xxx			
7.	Aggregate write-ins for other non-health revenues	xxx			
8.	Total revenues (Lines 2 to 7)	x x x	27,169,849	24,912,298	106,684,352
Hospita	al and Medical:				
9.	Hospital/medical benefits		14,671,376	23,716,238	67,893,892
10.	Other professional services		8,168,837	4,552,720	23,247,838
11.	Outside referrals				
12.	Emergency room and out-of-area				
13.	Prescription drugs				
14.	Aggregate write-ins for other hospital and medical				
15.	Incentive pool, withhold adjustments and bonus amounts				
16.	Subtotal (Lines 9 to 15)				
Less:			,,,,,,,,,,	,	,,,,,
17.	Net reinsurance recoveries				147 280
18.	Total hospital and medical (Lines 16 minus 17)				
19.	Non-health claims (net)				
20.	Claims adjustment expenses, including \$0 cost containment expenses				
21.	General administrative expenses				
22.	Increase in reserves for life and accident and health contracts (including \$0 increase		2,240,707		
22.	in reserves for life only)				
23.	Total underwriting deductions (Lines 18 through 22)				
24.	Net underwriting gain or (loss) (Lines 8 minus 23)				
25.	Net investment income earned				
26.	Net realized capital gains (losses) less capital gains tax of \$0				
27.	Net investment gains or (losses) (Lines 25 plus 26)				
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered		20,020	40,240	70,010
20.	\$0) (amount charged off \$0)]				
29.	Aggregate write-ins for other income or expenses				
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24				
30.	plus 27 plus 28 plus 29)		(502.468)	(7 800 217)	(3 700 450)
31.	Federal and foreign income taxes incurred				
32.	Net income (loss) (Lines 30 minus 31)				
	S OF WRITE-INS	'	, , , , , ,	, , , , ,	, ,
0601.					
0602. 0603.					
0698.	Summary of remaining write-ins for Line 6 from overflow page	X X X			
0699. 0701.	TOTALS (Lines 0601 through 0603 plus 0698) (Line 6 above)				
0701.					
0703.	Cumman of camping with ins for Line 7 from quartery page				
0798. 0799.	Summary of remaining write-ins for Line 7 from overflow page  TOTALS (Lines 0701 through 0703 plus 0798) (Line 7 above)				
1401.	Transportation			6,180	9,960
1402. 1403.	Translation		′		·
1498.	Summary of remaining write-ins for Line 14 from overflow page				
1499. 2901.	TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)				
2902.					
2903. 2998.	Summary of remaining write-ins for Line 29 from overflow page				
2998.	TOTALS (Lines 2901 through 2903 plus 2998) (Line 29 above)				

## **STATEMENT OF REVENUE AND EXPENSES (Continued)**

		1	2	3 Prior Year
		Current Year To Date	Prior Year To Date	Ended December 31
	CAPITAL & SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	7,084,022	9,502,058	9,502,058
34.	Net income or (loss) from Line 32	(592,468)	(7,800,217)	(2,306,566)
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$0			
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax			(354,469)
39.	Change in nonadmitted assets	(44,100)	(132,018)	(322,816)
40.	Change in unauthorized reinsurance			
41.	Change in treasury stock			
42.	Change in surplus notes			
43.	Cumulative effect of changes in accounting principles			
44.	Capital Changes:			
	44.1 Paid in			
	44.2 Transferred from surplus (Stock Dividend)			
	44.3 Transferred to surplus			
45.	Surplus adjustments:			
	45.1 Paid in			
	45.2 Transferred to capital (Stock Dividend)			
	45.3 Transferred from capital			
46.	Dividends to stockholders			
47.	Aggregate write-ins for gains or (losses) in surplus		(440,236)	565,816
48.	Net change in capital and surplus (Lines 34 to 47)	(636,568)	(8,372,471)	(2,418,035)
49. <b>DFTAI</b>	Capital and surplus end of reporting period (Line 33 plus 48)	6,447,454	1,129,587	7,084,022
4701. 4702.	Adjustments to annual filing pursuant to subsequent audit		(440,236)	565,816
4702. 4703. 4798.	Summary of remaining write-ins for Line 47 from overflow page			
4799.	TOTALS (Lines 4701 through 4703 plus 4798) (Line 47 above)			565,816

## **CASH FLOW**

		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations	10 Date	10 Date	December 31
1.	Premiums collected net of reinsurance	27,439,793	27.695.769	106.379.825
2.	Net investment income			
3.	Miscellaneous income	· ·		
4.	Total (Lines 1 to 3)			
5.	Benefit and loss related payments			
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		, ,	
7.	Commissions, expenses paid and aggregate write-ins for deductions			
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of \$ 0 tax on capital gains (losses)			
10.	Total (Lines 5 through 9)			
11.	Net cash from operations (Line 4 minus Line 10)			
	Cash from Investments		,	,
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds			
	12.2 Stocks			
	12.3 Mortgage loans			
	12.4 Real estate			
	12.5 Other invested assets			
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			
	12.7 Miscellaneous proceeds			
	12.8 Total investment proceeds (Lines 12.1 to 12.7)			
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds			
	13.2 Stocks			
	13.3 Mortgage loans			
	13.4 Real estate			
	13.5 Other invested assets			
	13.6 Miscellaneous applications			
	13.7 Total investments acquired (Lines 13.1 to 13.6)			
14.	Net increase (or decrease) in contract loans and premium notes			
15.	Net cash from investments (Line 12.8 minus Lines 13.7 and 14)			
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes			
	16.2 Capital and paid in surplus, less treasury stock			
	16.3 Borrowed funds			
	16.4 Net deposits on deposit-type contracts and other insurance liabilities			
	16.5 Dividends to stockholders			
	16.6 Other cash provided (applied)			
17.	Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6)	254,867		234,521
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	2,930,276	(5,313,216)	(730,465)
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year		28,926,117	
	19.2 End of period (Line 18 plus Line 19.1)  Note: Supplemental Disclosures of Cash Flow Information for Non-Cash Tra		23,612,901	28,195,652

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## **EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION**

		1	Comprehensive (H	lospital & Medical)	4	5	6	7	8	9	10
			2	3				Federal	>0.00	vav	
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
		Total	marviada	Стоир	очрынын	Only	Othy	Bononerium	Woodoure	Modicald	Otrioi
Total	Members at end of:										
1.	Prior Year	42,397	17,963							21,351	3,083
2.	First Quarter	43,973	19,182							21,921	2,870
3.	Second Quarter										
4.	Third Quarter										
5.	Current Year										
6.	Current Year Member Months	130,430	56,262							65,520	8,648
Total	Member Ambulatory Encounters for Period:										
7.	Physician	31,851	15,845							14,180	1,826
8.	Non-Physician	12,116	6,289							5,552	275
9.	Total	43,967	22,134							19,732	2,101
10.	Hospital Patient Days Incurred	2,987	1,410							1,400	177
11.	Number of Inpatient Admissions	574	267							277	30
12.	Health Premiums Written (a)	27,169,849	10,825,640							14,821,896	1,522,313
13.	Life Premiums Direct										
14.	Property/Casualty Premiums Written										
15.	Health Premiums Earned	27,169,849	10,825,640							14,821,896	1,522,313
16.	Property/Casualty Premiums Earned										
17.	Amount Paid for Provision of Health Care Services										
18.	Amount Incurred for Provision of Health Care										
	Services	25,316,650	9,526,123							14,703,365	1,087,162

<sup>(</sup>a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$.............0.

## CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported) Aging Analysis of Unpaid Claims

Aging Analysis of Oripaid Claims									
1	2	3	4	5	6	7			
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 days	Over 120 Days	Total			
Individually Listed Claims Unpaid									
Quality Plan Administration	1,053,330					1,053,330			
Caremark						382,379			
0199999 Individually Listed Claims Unpaid	1,435,709					1,435,709			
0299999 Aggregate Accounts Not Individually Listed - Uncovered									
0399999 Aggregate Accounts Not Individually Listed - Covered									
0499999 Subtotals	1,435,709					1,435,709			
0599999 Unreported claims and other claim reserves						24,711,000			
0699999 Total Amounts Withheld									
0799999 Total Claims Unpaid						26,146,709			
0899999 Accrued Medical Incentive Pool And Bonus Amounts									

## **UNDERWRITING AND INVESTMENT EXHIBIT**

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

						5	6
				Liability			
		Cla	ims	End	d of		
		Paid Yea	r to Date	Current	Quarter		
		1	2	3	4		Estimated Claim
							Reserve and
		On	On	On	On		Claim
	Line	Claims Incurred	Claims Incurred	Claims Unpaid	Claims Incurred	Claims Incurred	Liability
	of	Prior to January 1	During the	Dec.31 of	During the	in Prior Years	Dec.31 of
	Business	of Current Year	Year	Prior Year	Year	(Columns 1+3)	Prior Year
1.	Comprehensive (hospital & medical)					15,276,292	10,567,347
2.	Medicare Supplement						
3.	Dental only						
4.	Vision only						
5.	Federal Employees Health Benefits Plan						
6.	Title XVIII - Medicare						
7.	Title XIX - Medicaid						
8.	Other health						
9.	Health subtotal (Lines 1 to 8)					26,460,442	24,975,578
10.	Healthcare receivables (a)						
11.	Other non-health						
12.	Medical incentive pools and bonus amounts						
13.	Totals	18,952,108	5,193,411	7,508,335	18,638,374	26,460,442	24,975,578

<sup>(</sup>a) Excludes \$......0 loans or advances to providers not yet expensed.

#### **HEALTH RIGHT, INC.**

#### **Notes To Financial Statement**

#### Note 1. Summary of Significant Accounting Policies

**A.** Accounting Practices - The accompanying financial statements of Health Right, Inc. (HRI) are presented on the basis of accounting practices prescribed or permitted by the District of Columbia's Department of Insurance and Securities Regulations (DISR).

The District of Columbia Department of Insurance and Securities Regulations recognizes only statutory accounting practices prescribed or permitted by the District of Columbia for determining and reporting the financial condition and results of operations of an insurance company and for determining its solvency under the District of Columbia Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures manual, version effective March 2005 (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the District of Columbia.

- **B.** Use of Estimates in the Preparation of the Financial Statements The preparation of financial statements in conformity with the NAIC Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.
- **C. Accounting Policy** HRI records premium revenues based on its membership records. Premiums are due monthly and are recognized as revenue during the period in which HRI is obliged to provide service to members.

In addition, HRI uses the following accounting policies:

- 1) Short-term investments consist of readily marketable securities with maturities greater than three months but less than one year at the time of purchase.
- 2) None.
- 3) Unpaid claims and loss adjustment expenses include an amount determined from individual case estimates and claim reports and an amount, based on past experience, for claims incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.
- 4) HRI has not modified its capitalization policy from the prior period.

#### Note 2. Accounting Changes and Corrections of Errors

None.

Note 3. **Business Combinations and Goodwill** 

None

Note 4. **Discontinued Operations** 

None.

#### Note 5. **Investments**

Mortgage Loans, Debt Restructuring, Reverse Mortgages, Loan-Backed Securities Repurchase Agreements, or Real Estate - None.

#### Note 6. Joint Ventures, Partnerships and Limited Liability Companies

None.

#### Note 7. **Investment Income**

HRI reports only investment income that is earned as due and accrued.

#### Note 8. **Derivative Instruments**

None.

#### Note 9. Income Taxes

	December 31,	December 31,	
	2009	2008	Change
Total gross deferred tax assets (admitted and nonadmitted)	589,803	483,541	106,262
Valuation allowance	(328,806)		(328,806)
Total adjusted gross deferred tax assets (admitted and			
nonadmitted)	260,997	483,541	(222,544)
Total deferred tax liabilities	(131,925)	0	(131,925)
Net adjusted deferred tax assets	129,072	483,541	(354,469)
Total deferred tax assets nonadmitted in accordance with SSAP			,
No. 10R, Income Taxes	(129,072)	(17,590)	(111,482)
Net admitted deferred tax asset	(0)	465,951	(465,951)

The Company has not elected to admit deferred tax assets pursuant to SSAP 10R paragraph 10.

For 2009, the Company determined a valuation allowance of 328,806 was

For 2008, under SSAP No. 10, there was no statutory requirement to establish a valuation allowance.

- B. The Company has not recognized DTL's for the following:
  - 1. N/A 2. N/A

  - 3. N/A
  - 4. N/A

#### C. Current income taxes incurred consist of the following major components

po	2009	2008
Federal tax on operations	(1,218,675)	(1,272,150)
Federal tax on realized gains (losses)	Ó	Ó
Foreign tax		
Prior year taxes	(175,209)	0
Federal and foreign income taxes incurred	(1,393,884)	(1,272,150)

The main components of the 2008 deferred tax amounts are as

DTAs	Statutory	Tax	Difference	Effect
Losses and Loss Adjustment Expenses	25,587,548	25,083,422	504,126	171,403
Chartibable Contributions Carryforward	0	(89,931)	89,931	30,577
Nonadmitted assets	0	(1,140,658)	1,140,658	387,823
Total DTAs	25,587,548	23,852,833	1,734,715	589,803
Valuation Allowance	<del></del>		·	(328,806)
Adjusted DTAs			•	260,997
DTAs nonadmitted				(129,072)
Admitted DTAs			•	131,925
			•	

Tax

DTLs	Statutory	Tax	Difference	Tax Effect
Section 481 AdjustmentLoss Reserve Discounting	0	(388,015)	388,015	131,925
Total DTLs	0	(388,015)	388,015	131,925
Net admitted DTA				0

The changes in the main components of DTAs and DTLs are as follows:

2009	2008	Change
171,403	175,900	(4,497)
30,577	30,577	(0)
387,824	277,065	110,759
589,803	483,541	106,262
	30,577 387,824	171,403 175,900 30,577 30,577 387,824 277,065

Valuation Allowance	(328,806)		(328,806)
Adjusted DTAs	260,997	483,541	(222,544)
DTAs not admitted	(129,072)	(17,590)	(111,482)
Gross Admitted DTAs	131,925	465,951	(334,026)
DTLs resulting from book/tax differences in	2009	2008	Change
Section 481 AdjustmentLoss Reserve Discounting	131,925	0	131,925
Total DTLs	131,925	0	131,925
Net admitted DTA	(0)	465,951	(465,951)

D. The provision for Federal and foreign income taxes incurred is different from that which would be obtained by applying the statutory Federal income

rate to income before income taxes. The significant items causing this difference are as follows:

Effective tax rate reconciliation (total of current and deferred)

Encouve tax rate reconomission (total or current and deferred)			
			Effective
		Tax	Rate
Income tax expense (benefit) computed at statutory tax rate		(1,258,153)	34.0%
Change in Valuation Allowance		328,806	-8.9%
Prior year under (over) accrual		691	0.0%
Total statutory income tax expense (benefit)		(928,656)	25.1%
, , , , , , , , , , , , , , , , , , , ,		(1)	
			Effective
Recap:		Tax	Rate
Current Federal and foreign income taxes incurred per statement of	of income	(1,393,884)	37.7%
· · · · · · · · · · · · · · · · · · ·		(1,393,004)	31.170
Deferred tax expense (benefit) related to statement of income but	renected in	465 000	10.60/
surplus		465,228	-12.6%
Total statutory income tax expense (benefit)		(928,656)	25.1%
Current Income tax incurred (benefit) per statement of income:			
			Effective
	Amount	Tax Effect	Rate
Net gain from operations	(3,700,450)	(1,258,153)	34.0%
Tax adjustments:			
Loss Reserve Discounting	(13,227)	(4,497)	0.1%
Section 481 AdjustmentLoss Reserve Discounting	129,338	43,975	-1.2%
Prior year under (over) accrual		(175,209)	4.7%
Total Federal taxable income and income tax incurred	(3,584,339)	(1,393,884)	37.7%
	(0,000)	(1,000,001)	
Deferred Income tax expense (benefit) in surplus:			
Deferred income tax expense (benefit) in surplus.			Effective
		Tax	Rate
Change in not admitted DTA average or (hanefit) (nor OA		<u> I dX</u>	Rate
Change in net admitted DTAexpense or (benefit) (per 9A		405.054	40.00/
above)		465,951	-12.6%
Less items unrelated to statement of operations:		^	0.00/
Change in DTA netted against unrealized capital gains		0	0.0%
Change in DTA nonadmitted		(111,482)	3.0%
Change in DTA related to other nonadmitted assets		110,759	-3.0%
Deferred tax expense (benefit) related to statement of income		465,228	-12.6%

- E. Loss carryforwards and potential tax recoveries:
  - 1. At December 31, 2009 the company had no net operating loss carryforwards.
  - 2. The following are income taxes incurred in the current and prior years that will be available for recoupment in the event of

future net losses: a. 2009 b. 2008 \$0

- 3. The Company has not made any deposits under Section 6603 of the Internal Revenue Code as of December 31, 2009
- F. Federal tax allocation
  - 1. The company's federal income tax return is not consolidated with those of any other entity or
  - 2. N/A
- G. A summary of the Company's adjusted admitted gross DTA calculation by component and character for the year ended December 31, 2009
  as outlined in SSAP 10R is as follows:

Component	<u>Character</u>		
Adjusted gross deferred tax assets at enacted rate			260,997
Admitted gross deferred tax assets (para 10.a.)	N/A	0	
Admitted gross deferred tax assets (para 10.b.i.)	N/A	0	
Admitted gross deferred tax assets (para 10.c.)	Ordinary	131,925	
Total admitted gross deferred tax assets	_		131,925
Nonadmitted gross deferred tax assets			129,072

#### Note 10. Information Concerning Parent, Subsidiaries and Affiliates

- A. HRI is owned 97% by Unity Health Care, Inc. (UHC), a federally qualified health center operating in the District of Columbia.
- B. As of March 31, 2010, HRI reported \$1,081,600 as amounts due from the Parent Company, Unity Health Care. These receivables are dated within 60 days.
- C. UHC is a credentialed health care provider in HRI's provider network. For the quarter ending March 31, 2010, HRI paid UHC \$2,033,534.06 providing healthcare to HRI's enrolled members.
- D. None.
- E. None.
- F. Management and Administrative Services Agreement: On January 1, 2000, HRI entered into a management and administrative service agreement with UHC to provide senior management support, medical personnel support, human resources and payroll support, and financial and accounting support. This agreement also provides the services of UHC's Executive Director and Medical Director part-time to function as the Chairman and the Medical Director of HRI. This agreement was amended in November 2008 to a cost-In accordance with the amended agreement, HRI shall based contract. reimburse UHC for the total allocated share of General and Administrative (G&A) Services. UHC shall accumulate G&A costs that benefit both HRI and UHC into a cost pool and shall allocate a fair share of the pool to HRI on a quarterly basis using direct labor as an allocation. Any services not accounted for in the G&A cost pool shall be charged to HRI at the full cost of such services, including labor, fringe, overhead, space, and any other reasonable, allocable cost of providing such services. The agreement is retroactive to June 1, 2008 and shall continue until terminated by either party, or at any time upon the mutual consent of the parties. The management fee incurred through December 31, 2009 under this agreement was \$149,374. As of March 31, 2010 HRI owes \$36,000 in management fees to UHC.
- G. HRI is primarily owned by UHC.
- H. None.
- I. None.
- J. None.
- Note 11. **Debt**

None.

Note 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

HRI employees are covered by a defined contribution plan whereby contributions are matched up to 5% of each employee's compensation at the end of the each year. HRI's contribution for the plan was \$39,965 and \$36,522 for 2009 and 2008, respectively.

## Note 13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

- 1) HRI has 1,000 shares authorized and issued and 369 shares outstanding.
- 2) HRI has no preferred stock outstanding.
- 3) Dividend restrictions None.
- 4) Ordinary dividends None.
- 5) Restrictions on surplus None.

- 6) Advances to surplus None.
- HRI has 631 shares of common stock held in treasury.
- 8) Changes of balance in surplus funds None.
- 9) Unassigned funds (surplus) were reduced in as follows:

a) Unrealized gains and losses: \$0

b) Nonadmitted asset values: \$0

c) Separate account business: \$0

d) Asset valuation reserves: \$0e) Provision for reinsurance: \$0

- 10) Surplus debentures or similar obligations None.
- 11) Quasi-reorganizations None.
- 12) Quasi-reorganizations None.

#### Note 14. Contingencies

None.

#### Note 15. Leases

HRI entered into an office lease agreement commencing October 1, 2001 with an expiration date of September 30, 2011. The lease was amended in December 2005 for additional space, and the termination date was extended to July 31, 2013. The lease has an initial monthly payment approximating \$18,340 with an escalation of at least 2.5% per year. Rent expense incurred under the office lease for the years ended December 31, 2009 and 2008 was \$534,919 and \$423,584, respectively.

Future lease commitments under the agreement are estimated as follows:

Years ending	
December 31	
2010	391,443
2011	409,843
2012	420,042
2013	250,310
Total	\$ 1 471 638

Note 16. Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

None.

Note 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

None.

Note 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

None.

Note 19. **Direct Premium Written/Produced by Managing General Agents/Third Party Administrators** 

None.

#### Note 20. Other Items

None.

#### Note 21. Events Subsequent

The District of Columbia Department of Health Care Finance's ("DHCF") contract with the Company to provide health care services for the District's DC Healthy Families (Medicaid) and Alliance populations expired on April 30, 2010. The Company was notified in a letter dated April 1, 2010 of DHCF's intent to not exercise Option Year Two of the contract. The contract with DHCF provided the primary source of revenue for the Company and, as a result of the non-renewal of the contract; substantial doubt exists about the Company's ability to continue as a going concern.

#### Note 22. Reinsurance

HRI entered into a stop-loss insurance agreement with an insurance company to limit its losses on individual claims. Under the terms of this agreement, the insurance company will reimburse HRI approximately 90% of the cost of each member's eligible annual hospital services and eligible medical services, in excess of \$100,000 per member, respectively; if services are performed in a "per diem" or approved fixed procedural fee hospital. In the event HRI ceases operations, plan benefits will continue for members until the end of the contract period for which premiums have been paid.

Stop loss insurance premiums as of March 31, 2010 was \$305,101. HRI had no reinsurance recoveries for the first quarter of 2010. Uncollectible Reinsurance and Commutation of Ceded Reinsurance – None.

In May 2006, HRI added a retro corridor to the reinsurance policy. In the event total eligible claims under the policy exceed 55% of the total premium due, the reinsurer will reimburse HRI an amount equal to 55% of the total premium. If total claims exceed the sum of 55% of the total premium due plus the pmpm multiplied by the annual member months, the responsibility for payment of the excess will also be of the reinsurer.

#### Note 23. Retrospectively Rated Contracts & Contracts Subject to Redetermination

None.

#### Note 24. Change in Incurred Claims and Claim Adjustment Expenses

Reserves for claim adjustment expenses are \$612,000 March 31, 2010 for operational procedures and a new line of business.

Reserves for incurred claims attributable to insured events increased as of March 31, 2010 by approximately \$1.2 million from the previous year.

#### Note 25. **Intercompany Pooling Arrangements**

None.

#### Note 26. Structured Settlements

None.

#### Note 27. Health Care Receivables

None.

#### Note 28. Participating Policies

None.

STATEMENT AS OF  $March\ 31,\ 2010$  of the  $HEALTH\ RIGHT,\ INC.$ 

## **Notes to Financial Statement**

Note 29. **Premium Deficiency Reserves** 

None.

Note 30. **Anticipated Salvage and Subrogation** 

None.

## **GENERAL INTERROGATORIES**

## **PART 1 - COMMON INTERROGATORIES**

				GENERA					
	Domicile, as req	gentity experience any mater uired by the Model Act? eport been filed with the domi	. •	e filing of Disclos	ure of Material T	ransactions with	the State of	,	Yes[ ] No[X] Yes[ ] No[ ] N/A[X]
	<ul><li>2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?</li><li>2.2 If yes, date of change:</li></ul>							Yes[] No[X]	
3.	3. Have there been any substantial changes in the organizational chart since the prior quarter end?  If yes, complete the Schedule Y - Part 1 - organizational chart.						Yes[] No[X]		
4.1 4.2	If yes, provide the	g entity been a party to a mer e name of entity, NAIC Comp ult of the merger or consolida	pany Code, and state of don	the period cover nicile (use two le	ed by this statem tter state abbrevi	nent? iation) for any er	itity that has ceas	ed	Yes[]No[X]
		Na	1 ame of Entity		2 NAIC Company	Code	3 State of Domic	cile	
5.	or similar agreer If yes, attach an	·	gnificant changes regarding	the terms of the	agreement or pri	ing general ager incipals involved	nt(s), attorney-in-f ?	act,	Yes[ ] No[ ] N/A[X]
6.2	State the as of d date should be to State as of what	date the latest financial exar ate that the latest financial ex he date of the examined bala date the latest financial exar ity. This is the release date o	camination report became a nce sheet and not the date the nination report became avai	vailable from eith the report was co lable to other sta	ner the state of do ompleted or releates tes or the public	ased. from either the s	state of domicile of	or	12/31/2008 03/08/2010 03/08/2010
6.5	By what departm Have all financial filed with Departr	nent or departments? statement adjustments withi nents? commendations within the la		·		n a subsequent	financial statemer	Y	Yes[ ] No[ ] N/A[X] Yes[ ] No[ ] N/A[X]
	Has this reporting revoked by any of the street of the str	g entity had any Certificates governmental entity during the	of Authority, licenses or regi e reporting period?	strations (includi	ng corporate reg	istration, if appli	cable) suspended	l or	Yes[] No[X]
8.1 8.2 8.3	Is the company of the second o	a subsidiary of a bank holding 1 is yes, please identify the naffiliated with one or more ba 3 is yes, please provide belowes agency [i.e. the Federal RS), the Federal Deposit Insury federal regulator.]	ame of the bank holding con nks, thrifts or securities firms we the names and location (context) deserve Board (FRB), the Of	mpany. s? ity and state of t fice of the Comp	ne main office) o troller of the Cur	rency (OCC), the	Office of Thrift	eral	Yes[] No[X] Yes[] No[X]
		1	2	3	4	5	6	7	
		Affiliate Name	Location (City, State)	FRB Yes[] No[X]	OCC Yes[] No[X]	OTS Yes[] No[X]	FDIC . Yes[] No[X]	SEC . Yes[] No[	X1
9.1 9.2 9.2 9.3	similar functions (a) Honest and relationship (b) Full, fair, ac (c) Compliance (d) The prompt (e) Accountabil 1 If the response Has the code of 1 If the response Have any provi	curate, timely and understand with applicable governmental internal reporting of violation ity for adherence to the code to 9.1 is No, please explain: f ethics for senior managers to 9.2 is Yes, provide informations of the code of ethics be	ct to a code of ethics, which e ethical handling of actual condated disclosure in the periodal laws, rules and regulations is to an appropriate person condended a mended?  Seen amended?  Seen waived for any of the specific actual code.	includes the follor apparent confliction of the con	owing standards of interest be red to be filed by	? etween personal the reporting er	and professional		Yes[] No[X]  Yes[] No[X]  Yes[] No[X]
10.	1 Does the repor	to 9.3 is Yes, provide the nate	s due from parent, subsidiar	FINANCIA		statement?		\$	Yes[X] No[ ] 1,081,600
11.	Were any of the use by another	e stocks, bonds, or other assi person? (Exclude securities and complete information rela	ets of the reporting entity loa under securities lending agr	INVESTME		nent, or otherwis	e made available		Yes[] No[X]
12.		estate and mortgages held in		chedule BA:					0
		estate and mortgages held in		nd offiliates?				\$	0 Voci 1 No(V)
14. 14.	1 Does the repor 2 If yes, please c	ting entity have any investme omplete the following:	rius in parent, subsidiaries a	no amilates?					Yes[] No[X]

## **GENERAL INTERROGATORIES (Continued)**

		1	2
		Prior Year-End	Current Quarter
		Book/Adjusted	Book/Adjusted
		Carrying Value	Carrying Value
14.21	Bonds		
14.22	Preferred Stock		
14.23	Common Stock		
14.24	Short-Term Investments		
14.25	Mortgages Loans on Real Estate		
14.26	All Other		
14.27	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal		
	Lines 14.21 to 14.26)		
14.28	Total Investment in Parent included in Lines 14.21 to 14.26		
	above		

15.1 Has the reporting entity entered into any hedging transactions reported on S	Schedule DE
---	-------------

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.

Yes[ ] No[X] Yes[ ] No[ ] N/A[X]

16. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 3, III Conducting Examinations, F - Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

16.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

Yes[] No[X]

1	2	
Name of Custodian(s)	Custodian Address	
Sun Trust Bank	Washington, DC 20005-2108	

16.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1	2	3
Name(s)	Location(s)	Complete Explanation(s)

16.3 Have there been any changes, including name changes, in the custodian(s) identified in 16.1 during the current quarter?
16.4 If yes, give full and complete information relating thereto:

Yes[] No[X]

1	2	3	4
		Date	
Old Custodian	New Custodian	of Change	Reason

16.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1	2	3
Central Registration		
Depository	Name(s)	Address
Sun Trust Bank	Trustco Capital Management	1445 New York Avenue, NW STE 800, Washington DC 20005

17.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed?
17.2 If no, list exceptions:

Yes[]No[X]

## **GENERAL INTERROGATORIES**

#### **PART 2 - HEALTH**

<ol> <li>Operating Percentages:</li> <li>1.1 A&amp;H loss percent</li> <li>1.2 A&amp;H cost containment percent</li> <li>1.3 A&amp;H expense percent excluding cost containment expenses</li> </ol>	
<ul> <li>2.1 Do you act as a custodian for health savings accounts?</li> <li>2.2 If yes, please provide the amount of custodial funds held as of the reporting date.</li> <li>2.3 Do you act as an administrator for health savings accounts?</li> <li>2.4 If yes, please provide the balance of the funds administered as of the reporting date.</li> </ul>	Yes[ ] No[X] \$ Yes[ ] No[X] \$

## **SCHEDULE S - CEDED REINSURANCE**

**Showing All New Reinsurance Treaties - Current Year to Date** 

onowing Air New Remodration Treaties Surrent Tear to Bate									
1	2	3	4	5	6	7			
NAIC	Federal				Type of	Is Insurer			
Company	ID	Effective			Reinsurance	Authorized?			
Code	Number	Date	Name of Reinsurer	Location	Ceded	(Yes or No)			

### SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

**Current Year to Date - Allocated by States and Territories** 

		Current	rear to	Date - All	ocated by	States and				
						Direct Bus		-	1 0	
		1	2	3	4	5	6	7	8	9
						Federal	Life and Annuity			
			Accident and			Employees Health	Premiums	Property/	Total	
		Active	Health	Medicare	Medicaid	Benefits Program	and Other	Casualty	Columns	Deposit-Type
	State, Etc.	Status	Premiums	Title XVIII	Title XIX	Premiums	Considerations	Premiums	2 Through 7	Contracts
1.	Alabama (AL)									
2.	Alaska (AK)									
3.	Arizona (AZ)									
4.	Arkansas (AR)	N								
5.	California (CA)									
6.	Colorado (CO)	N								
7.	Connecticut (CT)									
8.	Delaware (DE)	N								
9.	District of Columbia (DC)	L	. 12,347,953		14,821,896				27,169,849	
10.	Florida (FL)									
11.	Georgia (GA)	N								
12.	Hawaii (HI)	N								
13.	Idaho (ID)									
14.	Illinois (IL)	N								
15.	Indiana (IN)									
16.	lowa (IA)									
17.	Kansas (KS)									
18.	Kentucky (KY)	N		1						
19.	Louisiana (LA)									
20.	Maine (ME)									
21.	Maryland (MD)									
22.	Massachusetts (MA)	N								
23.	Michigan (MI)									
24.	Minnesota (MN)	N								
25.	Mississippi (MS)									
26.	Missouri (MO)									
27.	Montana (MT)									
28.	Nebraska (NE)	IN								
29.	Nevada (NV)									
30.	New Hampshire (NH) New Jersey (NJ)									
31.										
32.	New Mexico (NM)									
33.	New York (NY)									
34.	North Carolina (NC)									
35.	North Dakota (ND)									
36.	Ohio (OH)									
37.	Oklahoma (OK)	1								
38.	Oregon (OR)									
39.	Pennsylvania (PA)									
40.	Rhode Island (RI)									
41.	South Carolina (SC)									
42.	South Dakota (SD)									
43.	Tennessee (TN)									
44.	Texas (TX)									
45.	Utah (UT)									
46.	Vermont (VT)									
47.	Virginia (VA)									
48.	Washington (WA)	N								
49.	West Virginia (WV)									
50.	Wisconsin (WI)									
51.	Wyoming (WY)									
52.	American Samoa (AS)									
53.	Guam (GU)									
54.	Puerto Rico (PR)									
55.	U.S. Virgin Islands (VI)									
56.	Northern Mariana Islands (MP)									
57.	Canada (CN)	N								
58.	Aggregate other alien (OT)						<u> </u>			
59.	Subtotal		. 12,347,953		14,821,896				27,169,849	
60.	Reporting entity contributions for									
	Employee Benefit Plans	X X X .								
61.	Total (Direct Business)		. 12,347,953		14,821,896		<del> </del>		27,169,849	
	ILS OF WRITE-INS		, , ,		, , , , , , , , , , , , , , , , , , , ,				, , , ,,,,,,	
5801.		X X X .								
5802.		X X X .							[	
5803.										
5898.	Summary of remaining write-ins for									
0000.	Line 58 from overflow page	x x x .								
5899.	TOTALS (Lines 5801 through 5803									
5033.	plus 5898) (Line 58 above)	x x x .								
	pius Josoj (Lilie Jo above)	.   ^ ^								

<sup>(</sup>a) Insert the number of L responses except for Canada and Other Alien.

#### SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART

# HEALTH RIGHT, INC. OWNERSHIP STRUCTURE

Unity Health Care FQHC-501(c)3 97% (Owner)

Columbia Road Health Services FQHC-501(c)3 3% (Owner)

Health Right, Inc.
For Profit
HMO

### SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

RESPONSE

No

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

Explanations:

Bar Codes:

Medicare Part D Coverage Supplement

Part D Coverage Suppl

## **OVERFLOW PAGE FOR WRITE-INS**

## **ASSETS**

	С	te	4	
	1	2	3	
			Net Admitted	December 31,
		Nonadmitted	Assets	Prior Year Net
	Assets	Assets	(Cols. 1 - 2)	Admitted Assets
1004. 0				
1097. Summary of remaining write-ins for Line 10 (Lines 1004 through 1096)				
2404. Receivable From Providers				319,602
2497. Summary of remaining write-ins for Line 24 (Lines 2404 through 2496)				319,602

### **SCHEDULE A - VERIFICATION**

Real Estate

		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted carrying value		
7.	Deduct current year's other than temporary impairment recognized		
8.	Deduct current year's depreciation		
9.	Book/adjusted carrying value at the end of current period (Lines 1 + 2 + 3 + 4 - 5 + 6 - 7 - 8)		
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)		
	1 1		

#### **SCHEDULE B - VERIFICATION**

Mortgage Loans

	mortgage Ecuno		
		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage interest points and commitment fees		
9.	Total foreign exchange change in book value/recorded investment excluding accrued interest		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1 + 2 + 3 + 4 + 5 +		
	6 - 7 - 8 + 9 - 10)		
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

#### **SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 + 6 - 7 - 8 + 9 - 10)		
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)		

#### **SCHEDULE D - VERIFICATION**

**Bonds and Stocks** 

		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year		
2.	Cost of bonds and stocks acquired		
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration for bonds and stocks disposed of		
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9)		
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)		

## QSI02

## **SCHEDULE D - PART 1B**

## Showing the Acquisitions, Dispositions and Non-Trading Activity During the Current Quarter for all Bonds and Preferred Stock by Rating Class

	During the Current Quarter for all Donus and Freiened Stock by Nathly Class								
		1	2	3	4	5	6	7	8
		Book/Adjusted				Book/Adjusted	Book/Adjusted	Book/Adjusted	Book/Adjusted
		Carrying Value	Acquisitions	Dispositions	Non-Trading	Carrying Value	Carrying Value	Carrying Value	Carrying Value
		Beginning of	During Current	During Current	Activity During	End of	End of	End of	December 31
		Current Quarter	Quarter	Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BOND	S								
1.	Class 1 (a)								
2.	Class 2 (a)								
3.	Class 3 (a)								
4.	Class 4 (a)								
5.	Class 5 (a)								
6.	Class 6 (a)								
7.	Total Bonds								
PREFI	ERRED STOCK								
8.	Class 1								
9.	Class 2								
10.	Class 3								
11.	Class 4								
12.	Class 5								
13.	Class 6								
14.	Total Preferred Stock								
15.	Total Bonds & Preferred Stock								

#### **SCHEDULE DA - PART 1**

#### **Short - Term Investments**

	1	2	3	4	5
	Book/Adjusted				Paid for Accrued
	Carrying		Actual	Interest Collected	Interest
	Value	Par Value	Cost	Year To Date	Year To Date
9199999. Totals	5,111,719	X X X			

### **SCHEDULE DA - Verification**

#### **Short-Term Investments**

	0.10.1.1.00		
		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	5,110,877	28,143,694
2.	Cost of short-term investments acquired		
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)	842	
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals		
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1 + 2 +		
	3 + 4 + 5 - 6 - 7 + 8 - 9)	5,111,719	5,110,877
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	5,111,719	5,110,877

## **SCHEDULE DB - PART A - VERIFICATION**

Options, Caps, Floors, Collars, Swaps and Forwards

1.	Book Adjusted Carrying Value, December 31, prior year (Line 8, prior year)	
2.	Cost Paid/(Consideration Received) on additions	
3.	Unrealized Valuation increase/(decrease)	
4.	Total recognized terminations	
5.	Considerations received/(paid) on terminations	
6.	Amortization	
7.	Adjustment to the Book/Adjusted Carrying Value of hedge item	
8.	Total foreign exchange change in Book/Adjusted Carrying Value	
9.	Book/Adjusted Carrying Value at End of Current Period (Lines 1 + 2 + 3 + 4 - 5 + 6 + 7 + 8)	
10.	Deduct nonadmitted assets	
11	Statement value at end of current period (Line 9 minus Line 10)	

## **SCHEDULE DB - PART B - VERIFICATION**

#### **Futures Contracts**

1.	Book/Adjusted Carrying Value, December 31 of prior year		
2.	Net Cash Deposits (Section 1, Broker Name/Net Cash		
	Deposits Footnote)		
3.1	Change in variation margin on open contracts		
3.2	Add:		
Chang	e in adjustment to basis of hedged item		
	3.21 Section 1, Column 16, current year minus		
	3.22 Section 1, Column 16, prior year	 	
Chang	e in amount recognized		
	3.23 Section 1, Column 15, current year minus		
	3.24 Section 1, Column 15, prior year		
3.3	Subtotal (Line 3.1 minus Line 3.2)		
4.1	Variation Margin on terminated contracts during the year		
4.2	Less:		
	4.21 Amount used to adjust basis of hedged item		
	4.22 Amount recognized	 	
4.3	Subtotal (Line 4.1 minus Line 4.2)		
5.	Dispositions gains (losses) on contracts terminated in prior		
	year:		
	5.1 Recognized		
	5.2 Used to adjust basis of hedged items		
6.	Book Adjusted Carrying Value at end of current period (Lines		
	1 + 2 + 3.3 - 4.3 - 5.1 - 5.2)		
7.	Deduct total nonadmitted amounts		
8.	Statement value at end of current period (Line 6 minus Line 7) .		

## **SCHEDULE DB - PART C - SECTION 1**

## Replication (Synthetic Asset) Transactions Open as of Current Statement Date

	Replica	tion (Synthetic Asset) Tra	nsactions							Componen	ts of the Replica	ation (Synthetic Asset) Ti	ransactions		
1	2	3	4	5	6	7	8	Derivative	Derivative Instrument(s) Open Cash Instrument(s) Held						
								9	10	11	12	13	14	15	16
Replication		NAIC													
RSAT		Designation or	Notional	Book/Adjusted		Effective	Maturity		Book/Adjusted				NAIC Designation or	Book/Adjusted	
Number	Description	Other Description	Amount	Carrying Value	Fair Value	Date	Date	Description	Carrying Value	Fair Value	CUSIP	Description	Other Description	Carrying Value	Fair Value
9999999 Totals						XXX	. X X X .	X X X			X X X	X X X	X X X		

## QSI

## SCHEDULE DB - PART C - SECTION 2

## Replication (Synthetic Asset) Transactions Open

	First (	Quarter	Second	Quarter	Third	Quarter	Fourth	Quarter	Year-	To-Date
	1	2	3	4	5	6	7	8	9	10
		Total Replication								
		(Synthetic Asset)								
	Number of	Transactions								
	Positions	Statement Value								
1. Beginning Inventory										
2. Add: Opened or Acquired Transactions										
3. Add: Increases in Replication (Synthetic Asset) Transactions										
Statement Value	X X X		X X X		X X X		X X X		X X X	
4. Less: Closed or Disposed of Transactions										
5. Less: Positions Disposed of for Failing Effectiveness Criteria										
6. Less: Decreases in Replication (Synthetic Asset) Transactions										
Statement Value	X X X		X X X		X X X		X X X		X X X	
7. Ending Inventory										

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## **SCHEDULE DB - VERIFICATION**

Verification of Book/Adjusted Carrying Value, Fair Value and Potential Exposure of all Open Derivative Contracts

		·	Book/A	djusted
			Carryin <sub>i</sub> Che	g Value
			Che	eck
	Part A, Section 1, Column 14			
2.	Part B, Section 1, Net Broker Cash Deposit Write-in (Footnote)			
3.	Part B, Section 1, Column 17			
ŀ.	Subtotal (Line 2 minus Line 3)			
).	Total (Line 1 plus Line 4)			
<b>3</b> .	Part D, Column 5			
7.	Part D, Column 6			
3.	Total (Line 5 minus Line 6 minus Line 7)			

		. •	Value eck
9.	Part A, Section 1, Column 16		
10.	Part B, Section 1, Column 2 (Number of Contracts) multiplied by Column 12 (Reporting Date Price)		
11.	Total (Line 9 plus Line 10)		
12.	Part D, Column 8		
13.	Part D, Column 9		
14.	Total (Line 11 minus Line 12 minus Line 13)		

		Exposure eck
15.	Part A, Section 1, Column 21	
16.	Part B, Section 1, Column 18	
17.	Part D, Column 11	
18.	Total (Line 15 plus Line 16 minus Line 17)	

### **SCHEDULE E - Verification**

(Cash Equivalents)

		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	23,316,000	
2.	Cost of cash equivalents acquired	2,345,000	23,316,000
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals		
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1 + 2 +		
	3 + 4 + 5 - 6 - 7 + 8 - 9)	25,661,000	23,316,000
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	25,661,000	23,316,000

## **SCHEDULE A - PART 2**

Showing all Real Estate ACQUIRED AND ADDITIONS MADE During the Current Quarter

Onowing an item Estate No.	COULTD VIID VI	יווטי		During the Guirent Quarter				
1	Location		4	5	6	7	8	9
	2	3					Book/Adjusted	Additional
					Actual Cost		Carrying	Investment
Description					at Time	Amount of	Value Less	Made After
of Property	City	State	Date Acquired	Name of Vendor	of Acquisition	Encumbrances	Encumbrances	Acquisition
0399999 Totals								

## **SCHEDULE A - PART 3**

Showing All Real Estate DISPOSED During the Quarter, Including Payments During the Final Year on "Sales Under Contract"

	011011					9	<b>~</b> ~~,		.g. ∝j	01110 D G	9		<b>. .</b>						
1	Location		4	5	6	7	8	C	hange in Book/Adj	usted Carrying Val	lue Less Encumbrand	es	14	15	16	17	18	19	20
	2	3	1			Expended for		9	10	11	12	13							1
						Additions,	Book/Adjusted		Current Year's				Book/Adjusted		Foreign			Gross Income	Taxes,
						Permanent	Carrying Value		Other Than			Total Foreign	Carrying Value		Exchange	Realized	Total	Earned Less	Repairs
Description						Improvements	Less		Temporary	Current Year's	Total Change	Exchange	Less	Amounts	Gain	Gain	Gain	Interest	and
of			Disposal	Name of	Actual	and Changes in	Encumbrances	Current Year's	Impairment	Change in	in B/A C.V.	Change in	Encumbrances	Received	(Loss) on	(Loss) on	(Loss) on	Incurred on	Expenses
Property	City	State	Date	Purchaser	Cost	Encumbrances	Prior Year	Depreciation	Recognized	Encumbrances	(11 - 9 - 10)	B/A C.V.	on Disposal	During Year	Disposal	Disposal	Disposal	Encumbrances	Incurred
0399999 Totals																			

## **SCHEDULE B - PART 2**

Showing All Mortgage Loans ACQUIRED AND ADDITIONS MADE During the Current Quarter

	i tgage Loans Aogon	TED MITE MEDITIC	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, tile our	Cit Qualte		
1	Location	n	4	5	6	7	8	9
	2	3						
							Additional	Value of
							Investment	Land
	City	State	Loan	Date	Rate	Actual Cost at	Made After	and
Loan Number			Туре	Acquired	of Interest	Time of Acquisition	Acquisition	Buildings
3399999 Total Mortgages (sum of Lines 0899999, 1699999, 2499	999 and 3299999)							

## **SCHEDULE B - PART 3**

Showing All Mortgage Loans DISPOSED. Transferred or Repaid During the Current Quarter

	0110	g / mo.tg	490 <b>–</b> 0	uno Dio		,		. topaia	– u	iio ouii	onit Quui	101					
1	Location		4	5	6	7		Cl	hange in Book Vali	ue/Recorded Inve	stment		14	15	16	17	18
	2	3				Book	8	9	10	11	12	13	Book			1 '	
						Value/Recorded			Current Year's		Total		Value/Recorded		Foreign	1 '	
						Investment	Unrealized		Other Than	Capitalized	Change	Total Foreign	Investment		Exchange	Realized	Total
						Excluding	Valuation	Current Year's	Temporary	Deferred	in	Exchange	Excluding		Gain	Gain	Gain
Loan			Loan	Date	Disposal	Accrued Interest	Increase	(Amortization)/	Impairment	Interest and	Book Value	Change in	Accrued Interest	Consider-	(Loss) on	(Loss) on	(Loss) on
Number	City	State	Туре	Acquired	Date	Prior Year	(Decrease)	Accretion	Recognized	Other	(8+9-10+11)	Book Value	on Disposal	ation	Disposal	Disposal	Disposal
0599999 Totals																	

## **SCHEDULE BA - PART 2**

Showing Other Long-Term Invested Assets ACQUIRED AND ADDITIONS MADE During the Current Quarter

	••	g •o. =og . o	1001047100010	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			9	a	.a		
1	2	Location		5	6	7	8	9	10	11	12	13
		3 4		Name					Additional		Commitment	
				of		Date		Actual Cost at	Investment	Amount	for	
CUSIP	Name or			Vendor or	NAIC	Originally	Type and	Time of	Made After	of	Additional	Percentage of
Identification	Description	City	State	General Partner	Designation	Acquired	Strategy	Acquisition	Acquisition	Encumbrances	Investment	Ownership
3999999 Total - Una	affiliated											XXX
4099999 Total - Affil	liated											XXX
4199999 TOTALS .												XXX

## **SCHEDULE BA - PART 3**

Showing Other Long-Term Invested Assets DISPOSED, Transferred or Repaid During the Current Quarter

		01101	Tilly Culci	Long ronnin	• COLCA	71000	CO DIOI V	JULD, 1	IUIIOIGII	ca or ix	cpaid D	aring the	our cir	. Qualter					
1	2	Location	1	5	6	7	8		(	Change in Book/A	djusted Carrying V	alue		15	16	17	18	19	20
		3	4					9	10	11	12	13	14						
							Book/Adjusted		Current Year's	Current Year's			Total	Book/Adjusted					
				Name of			Carrying	Unrealized	(Depreciation)	Other Than	Capitalized	Total	Foreign	Carrying Value		Foreign	Realized	Total	
				Purchaser	Date		Value Less	Valuation	or	Temporary	Deferred	Change in	Exchange	Less		Exchange	Gain	Gain	
CUSIP	Name or			or Nature of	Originally	Disposal	Encumbrances,	Increase	(Amortization)/	Impairment	Interest and	B./A.C.V.	Change in	Encumbrances		Gain (Loss)	(Loss) on	(Loss) on	Investment
Identification	Description	City	State	Disposal	Acquired	Date	Prior Year	(Decrease)	Accretion	Recognized	Other	(9 + 10 - 11 + 12)	B./A.C.V.	on Disposal	Consideration	on Disposal	Disposal	Disposal	Income
3999999 Total - Un	99999 Total - Unaffiliated																		
4099999 Total - Aff	iliated																		
4199999 TOTALS																			

## **SCHEDULE D - PART 3**

Show All Long-Term Bonds and Stock Acquired by the Company During the Current Quarter

	Show All Long-Term Bonds and Stock Acquired by the Company During the Current Quarter														
1	2	3	4	5	6	7	8	9	10						
								Paid for	NAIC						
								Accrued	Designation						
CUSIP				Name of	Number of			Interest and	or Market						
Identification	Description	Foreign	Date Acquired	Vendor	Shares of Stock	Actual Cost	Par Value	Dividends	Indicator (a)						
8399998 Summary Ite	em from Part 5 for Bonds (N/A to Quarterly)				X X X	X X X	X X X	X X X	X X X						
8999998 Summary Ite	em from Part 5 for Preferred Stocks (N/A to Quarterly)				X X X	X X X	X X X	X X X	X X X						
9799998 Summary Ite	em from Part 5 for Common Stocks (N/A to Quarterly)				X X X	X X X	X X X	X X X	X X X						
9899999 Subtotal - Pr	referred and Common Stocks		X X X		X X X		X X X								
9999999 Total - Bond	ls, Preferred and Common Stocks				X X X		X X X		X X X						

<sup>(</sup>a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues ...................0.

## **SCHEDULE D - PART 4**

# Show All Long-Term Bonds and Stocks Sold, Redeemed, or Otherwise Disposed of During the Current Quarter

										• •	<b></b>										
1	2	3	4	5	6	7	8	9	10		Change in Bo	ook/Adjusted Ca	rrying Value		16	17	18	19	20	21	22
		F								11	12	13	14	15							
		0																			
		r							Prior Year			Current Year's		Total	Book/				Bond Interest/		
		е							Book/	Unrealized		Other Than	Total	Foreign	Adjusted	Foreign			Stock		NAIC
		i			Number				Adjusted	Valuation	Current Year's	Temporary	Change in	Exchange	Carrying Value	Exchange	Realized	Total	Dividends		Designation
CUSIP		g	Disposal	Name of	of Shares		Par	Actual	Carrying	Increase/	(Amortization)/	Impairment	B./A.C.V.	Change in	at Disposal	Gain (Loss)	Gain (Loss)	Gain (Loss)	Received	Maturity	or Market
Identification	Description	n	Date	Purchaser	of Stock	Consideration	Value	Cost	Value	(Decrease)	Accretion	Recognized	(11 + 12 - 13)	B./A.C.V.	Date	on Disposal	on Disposal	on Disposal	During Year	Date	Indicator (a)
8399998 Summ	nary Item from Part 5 for Bonds (N/A to Qu	arterly)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	. XXX.	XXX.
8999998 Summ	nary Item from Part 5 for Preferred Stocks	(N/A to C	Quarterly)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	. XXX.	XXX.
9799998 Summ	nary Item from Part 5 for Common Stocks	(N/A to C	Quarterly)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	. XXX.	XXX.
9899999 Subtot	tal - Preferred and Common Stocks				XXX		XXX													. XXX.	XXX.
9999999 Total -	Bonds, Preferred and Common Stocks .				XXX		XXX													. XXX.	XXX.

<sup>(</sup>a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues .....

## **SCHEDULE DB - PART A - SECTION 1**

	Showing all Options, Caps, Floors, Collars, Swaps and Forwards Open as of Current Statement Date  1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23																					
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
									Strike		Current Year											Hedge
									Price,	Prior Year	Initial						Total					Effectiveness
									Rate of	Initial Cost	Cost of		Book/			Unrealized	Foreign		Adjustment		Credit	at Inception
	Description of Items	Schedule/				Date of	Number		Indexed	of Premium	Premium		Adjusted			Valuation	Exchange	Current Year's	to Carry		Quality of	and at
	Hedged or Used for	Exhibit	Type(s)	Exchange or	Trade	Maturity or	of	Notional	Received	Received	Received	Current Year	Carrying		Fair	Increase/	Change in	(Amortization)	Value of	Potential	Reference	Quarter end
Description	Income Generation	Identifier	of Risk(s)	Counterparty	Date	Expiration	Contracts	Amount	(Paid)	(Paid)	(Paid)	Income	Value	Code	Value	(Decrease)	B./A.C.V.	Accretion	Hedged Item	Exposure	Entity	(a)
0369999 Total - Purchased Opt	tions - Call Options and Warran	ts												XXX .							XXX	XXX
0379999 Total - Purchased Opt	tions - Put Options													XXX .							XXX	XXX
0389999 Total - Purchased Opt	0389999 Total - Purchased Options - Caps 0399999 Total - Purchased Options - Floors													XXX .							XXX	XXX
0399999 Total - Purchased Opt						XXX .							XXX	XXX								
0409999 Total - Purchased Opt	tions - Collars													XXX .							XXX	XXX
0419999 Total - Purchased Opt	tions - Other													XXX .							XXX	XXX
0429999 Total - Purchased Opt	tions													XXX .							XXX	XXX
0789999 Total - Written Options	s - Call Options and Warrants .													XXX .							XXX	XXX
0799999 Total - Written Options	s - Put Options													XXX .							XXX	XXX
0809999 Total - Written Options	s - Caps													XXX .							XXX	XXX
0819999 Total - Written Options	s - Floors													XXX .							XXX	XXX
0829999 Total - Written Options	s - Collars													XXX .							XXX	XXX
0839999 Total - Written Options	s - Other													XXX .							XXX	XXX
0849999 Total - Written Options	s													XXX .							XXX	XXX
1159999 Total - Swaps - Interes	st Rate													XXX .							XXX	XXX
1169999 Total - Swaps - Credit	t Default													XXX .							XXX	XXX
1179999 Total - Swaps - Foreig	gn Exchange													XXX .							XXX	XXX
1189999 Total - Swaps - Total F	Return													XXX .							XXX	XXX
1199999 Total - Swaps - Other														XXX .							XXX	XXX
1209999 Total - Swaps														XXX .							XXX	XXX
1399999 Grand Total - Hedging	g Effective													XXX .							XXX	XXX
1409999 Grand Total - Hedging	g Other													XXX .							XXX	XXX
1419999 Grand Total - Replicat	tion													XXX .							XXX	XXX
1429999 Grand Total - Income														XXX .							XXX	XXX
1439999 Grand Total - Other .																					XXX	XXX
1440000 CDAND TOTAL														VVV							VVV	V V V

	1	2
		Financial or Economic Impact of the Hedge
	Code	at the End of the Reporting Period
A0001	0000	

## **SCHEDULE DB - PART B - SECTION 1**

<b>Futures Contracts</b>	Open as of the Curren	t Statement Date
i atai co ociiti acto	open de el tile edition	t Otatomont Date

								Contracto Open ac										
1	2	3	4	5	6	7	8	9	10	11	12	13		Change in Va	aluation Margin		18	19
													14	15	16	17		
															Gain (Loss)			Hedge
												Book/		Gain (Loss)	Used to			Effectiveness
					Schedule/		Date of					Adjusted		Recognized	Adjusted Basis			at Inception
Ticker	Number of	Notional		Description of	Exhibit	Type(s) of	Maturity or		Trade	Transaction	Reporting	Carrying		in Current	of Hedged		Potential	and at
Symbol	Contracts	Amount	Description	Hedged Item(s)	Identifier	Risk(s)	Expiration	Exchange	Date	Price	Date Price	Value	Cumulative	Year	Item	Deferred	Exposure	Quarter-end (a)
1399999 Total - He	edging Effectiv	e																XXX
1409999 Total - He	edging Other .																	XXX
1419999 Total - Re	eplication																	XXX
1429999 Total - Inc	come Generat	on																XXX
1439999 Total - Ot	her																	XXX
1449999 Grand To	tal																	X X X

	1	2
		Net Cash
	Broker Name	Deposits
9999999		
9999999	Total - Net Cash Deposits	

	1	2
		Financial or Economic Impact of the Hedge
	Code	at the End of the Reporting Period
A0001	0000	

## **SCHEDULE DB - PART D**

Counterparty Exposure for Derivative Instruments Open as of Current Statement Date

	Counterparty Exposure for Derivative institutions Open as of Current Statement Date														
1	2	3	4	Book/	Adjusted Carrying	Value		Fair Value		11	12				
				5	6	7	8	9	10						
				Contracts With	Contracts With										
		Credit		Book/	Book/										
	Master	Support	Fair Value	Adjusted	Adjusted		Contracts With	Contracts With			Off-Balance				
Description Counterparty or	Agreement	Annex	of Acceptable	Carrying	Carrying	Exposure net	Fair	Fair	Exposure Net	Potential	Sheet				
Exchange Traded	(Y or N)	(Y or N)	Collateral	Value > 0	Value < 0	of Collateral	Value > 0	Value < 0	of Collateral	Exposure	Exposure				
0199999 Aggregate Sum of Exchange Traded Derivatives .															
0899999 Total															

STATEMENT AS OF  $March\ 31,\ 2010$  of the  $HEALTH\ RIGHT,\ INC.$ 

## **SCHEDULE E - PART 1 - CASH**

Month End Depository Balances

IIIOII	ui Liia D	epository b	ulullocs					
1	2	3	4	5	Book Balance at End of Each Month			9
					During Current Quarter			
			Amount	Amount of	6	7	8	
			of Interest	Interest				
			Received	Accrued				
			During	at Current				
		Rate of	Current	Statement	First	Second	Third	
Depository	Code	Interest	Quarter	Date	Month	Month	Month	*
open depositories								
Business								
Checking-Operations Account Business Checking-Beacon					(590,180)	(392,099)	327,683	XXX
Health Account SunTrust Bank					34,755	36,693	25,526	XXX
0199998 Deposits in0 depositories that do not exceed the								
allowable limit in any one depository (See Instructions) - open depositories	. XXX	X X X						XXX
0199999 Totals - Open Depositories	. XXX	X X X			(555,425)	(355,406)	353,209	XXX
0299998 Deposits in0 depositories that do not exceed the								
allowable limit in any one depository (See Instructions) - suspended								
depositories	XXX	X X X						XXX
0299999 Totals - Suspended Depositories		X X X						XXX
0399999 Total Cash On Deposit	XXX	X X X			(555,425)	(355,406)	353,209	XXX
0499999 Cash in Company's Office		X X X	. X X X .	X X X				XXX
0599999 Total Cash	XXX	X X X			(555,425)	(355,406)	353,209	XXX

## QE10

## **SCHEDULE E - PART 2 - CASH EQUIVALENTS**

#### Show Investments Owned End of Current Quarter

One of the control of								
1	2	3	4	5	6	7	8	
						Amount of		
		Date	Rate of	Maturity	Book/Adjusted	Interest	Amount Received	
Description	Code	Acquired	Interest	Date	Carrying Value	Due & Accrued	During Year	
All Other Governments - Defined Multi-Class Residential Mortgage-Backed Securities								
			0.000		25,661,000			
0699999 Subtotals - All Other Governments - Defined Multi-Class Residential Mortgage-Backed Securities	25,661,000							
1099999 Subtotals - All Other Governments	25,661,000							
7999999 Subtotals - Defined Multi-Class Residential Mortgage-Backed Securities	25,661,000							
8399999 Subtotals - Bonds	25,661,000							
Sweep Accounts								
Suntrust Bank			0.014					
8499999 Sweep Accounts								
8599999 Other Cash Equivalents								
8699999 Total - Cash Equivalents								



## MEDICARE PART D COVERAGE SUPPLEMENT

### Net of Reinsurance For the Quarter Ended March 31, 2010

NAIC Group Code: NAIC Company Code: 95787

		Individual	Coverage	Group C	5	
		1	2	3	4	Total
		Insured	Uninsured	Insured	Uninsured	Cash
1.	Premiums Collected		X X X		X X X	
2.	Earned Premiums		X X X		X X X	X X X
3.	Claims Paid		X X X		X X X	
4.	Claims Incurred		X X X		X X X	X X X
5.	Reinsurance Coverage and Low Income Cost Sharing - Claims					
	Paid Net of Reimbursements Applied (a)	X X X		X X X		
6.	Aggregate Policy Reserves - change		X X X		X X X	X X X
7.	Expenses Paid		X X X		X X X	
8.	Expenses Incurred		X X X		X X X	X X X
9.	Underwriting Gain or Loss		X X X		X X X	X X X
10.	Cash Flow Results	X X X	X X X	X X X	X X X	

<sup>(</sup>a) Uninsured Receivable/Payable with CMS at End of Quarter: \$......0 due from CMS or \$......0 due to CMS

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